PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 219002030500 First Inventor Sundeep DUGAR BI-CYCLIC PYRIMIDINE INHIBITORS OF TGFB Title

(Only for new nonprovisional applications under 37 CFR 1.53(b)) EL 983653047 US Express Mail Label No. MS Patent Application **APPLICATION ELEMENTS** Commissioner for Patents ADDRESS TO: See MPEP chapter 600 concerning utility patent application contents. P.O. Box 1450 Alexandria, VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) and duplicate for fee CD-ROM or CD-R in duplicate, large table or processing in 2 pages. (Submit an original, and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Х Specification [Total Pages 85 Computer Readable Form (CRF) (preferred arrangement set forth below) Specification Sequence Listing on: Descriptive title of the invention Cross Reference to Related Applications
 Statement Regarding Fed sponsored R & D
 Reference to sequence listing, a table, CD-ROM or CD-R (2 copies); or Paper Statements verifying identity of above copies or a computer program listing appendix Background of the Invention **ACCOMPANYING APPLICATION PARTS** Brief Summary of the Invention
 Brief Description of the Drawings (if filed)
 Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claim(s)
- Abstract of the Disclosure 37 CFR 3.73(b) Statement Power of 10 (when there is an assignee) Attomev Drawing(s) (35 U.S.C. 113) (Total Sheets 11. English Translation Document (if applicable) Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS 5. Oath or Declaration [Total Sheets 12. Citations Newly executed (original or copy) 13. Preliminary Amendment Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. (Should be specifically itemized) Certified Copy of Priority Document(s) 15. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 16 Applicant must attach form PTO/SB/35 or its equivalent. 17. Other 6. X Application Data Sheet in 3 pages. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS х Customer Number: 25225 OR Correspondence address below Name Address City State Zip Code Country Telephone -Mullen, III Name (Print/Type) James Registration No. (Attorney/Agent) 44.957 Signature March 26, 2004 Date I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 983653047 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the

26/04

Signature:

Dated:

PTO/SB/17 (10-03)

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FEE TRANSMITTAL					Complete if Known						
		Application Number Not Yet Assigned					Assigned				
for FY 2004				Filing Date				Concurrently Herewith			
	Ì	First Named Inventor				Sundeep DUGAR					
Effective	Examiner Name				-	Not Yet Assigned					
Applie	ŀ	Art Unit				Not Yet Assigned					
TOTAL AMOUNT OF PAYMENT (\$) 770.00				Attorney Docket No. 219002030500							
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METHOD OF PAYMENT (check all that apply) Check Credit Money Check Name				FEE CALCULATION (continued)							
Check X Deposit		DDITIO									
Deposit Account Number	03-1952		Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Desc	cription	Fee Paid	
Deposit Account Morrison & Foerster LLP			1051	130	2051	65	Surcharge	- late filing fe	ee or oath		
Name The Director is authorized to: (check all that apply)			1052	50	2052	25	Surcharge sheet.	rge – late provisional filing fee or cover			
X Charge fee(s) indicated below X Credit any overpayments			1053	130	1053	130	Non-Englis	English specification			
X Charge any additional fee(s) or any underpayment of fee(s)			1812	2,520	1812	2,520	For filing a	g a request for ex parte reexamination			
Charge fee(s) indicated below, except for the filing fee			1804	920*	1804	920*	Examiner	action	of SIR prior to		
to the above-identified deposit account.			1805	1,840*	1805	1,840*	Requesting Examiner	g publication of action	of SIR after		
FEE CALCULATION			1251	110	2251	55	Extension	for reply within	n first month		
1. BASIC FILING FEE			1252	420	2252	210	Extension	for reply within	n second month		
Large Entity Fee Fee	Small Entity Fee Fee Fee Descript	ian For Bold	1253	950	2253	475	Extension	for reply within	n third month		
	Code (\$)	ion Fee Paid	1254	1,480	2254	740	Extension	for reply within	n fourth month		
1001 770	2001 385 Utility filing fee	770.00	1255	2,010	2255	1,005	Extension	for reply within	n fifth month		
1002 340	2002 170 Design filing fe	e	1401	330	2401	165	Notice of A	ppeal			
	2003 265 Plant filing fee		1402	330	2402	165	Filing a brid	ef in support o	of an appeal		
1	2004 385 Reissue filing		1403	290	2403	145	-	r oral hearing		<u> </u>	
1005 160	2005 80 Provisional fili	ng fee	1451	1,510	1451				olic use proceeding	<u> </u>	
	SUBTOTAL (1) (\$	770.00	1452 1453	110 1,330	2452 2453	55		revive – unav		<u> </u>	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1,330	2501	665		revive - uninte			
Extra Fee from				480	2502	665	-	e fee (or reiss	ue)	-	
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Independent	= ==		1503	640	2503 1460	320	Plant issue		-!		
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Multiple Dependent 0 = 0.00			1807 1806	50	1807	50	-	=	7 CFR 1.17(q)		
				180	1806	180			on Disclosure Stmt		
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	2202 9 Claims in excess of 20 2201 43 Independent claims in excess of 3		1809	770	2809	385	Filing a sul		final rejection		
	2201 43 Independent claims in excess of 3 2203 145 Multiple dependent claim, if not paid		1810	770	2810	385		additional invention to be			
1204 86 2	204 43 ** Reissue independent claims over original patent		1801	770	2801	385	Request fo	for Continued Examination (RCE)			
1205 18 2	2205 9 ** Reissue claims in		1802	900	1802	900		or expedited en application	xamination		
	Other fee (specify)										
l	SUBTOTAL (2) (\$)	*Redu	duced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00								
**or number previously paid, if greater; For Reissues, see above											
SUBMITTED B		(Complete (if applicable))									
Name (Print/Type) James . Mullen, III				ration No. 944,957 Telephone (858) 720-7940)			
Signature					_	Date	March 26, 2004	!			
Signature Date March 26, 2004											